IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethlcs



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest,

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Gift or Bequest Information received by a department or accepted by the

Governor on benalt of the state		
	For office use only	
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Compute	or	

DEPARTMENT OR	OFFICE RECEIVING THE	GIFT OR REOLIEST

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUE	ST:		
IA Department of Human Rights	→ → → → → → → → → → → → → → → → → → → 		
Name of Department or Office 321 E 12th Street D	log Moinne IA 50210		
	Des Moines, 1A 50319 City, State, Zip Code		
SIS-28I-3274 Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI	CE:		
Kimberly Cheeks			
Name	•		
Mailing Address (If different from above)	City, State, Zlp (If different from above)		
kim.cheeks@iowa.gov			
Email Address	Area Code & Telephone Number (if different from above)		
DONOR OF GIPT OR BEQUEST:			
Vera R Kemp			
Name			
1249 E 14th St Des Moines IA 50316			
Mailing Address City, State, Zlp Code	January 10, 2019 \$50.00		
515-262-6212	Date of Gift or Bequest Amount/Value*		
Area Code & Telephone Number	°value is defined as "fair market value" of ilem as determined by		
vera1249@netzero.com	receiving department or office. If no value mark "0.00".		
Email Address (optional)			
Provide a description of the gift or bequest and purpose thereof;			
Donation - 2019 MLK Event - "I Have a Dream" to b	so hold in DCM 1/10/10		
Donation - 2013 MIER Event - 1 11ave a Dieant To E	oe neid iii iosivi 1/19/19		
Criteria to use this form:	- Management of the Control of the C		
Receipt of any glit or bequest that is received by any department of the	state or received by the Governor on behalf of the state.		
tatement of Affirmation:	· · · · · · · · · · · · · · · · · · ·		
Kimberly Cheeks			
affirm that the gift or bequest reported aboves a season of the fair market value (if applicable) is correct and true to the	ve is accurate. I further affirm that the information concerning the donor and		
asessinent of the rain market value (ii abblicable) is correct and 10.0 to the	dest of my knowledge.		
dr. a	T 40 2040		
Kim Cheeks/ Los	January 10, 2019		
Signature /	Date		